

TESTIMONY APPROPRIATIONS COMMITTEE February 23, 2022

HB 5037, An Act Adjusting the State Budget for the Biennium Ending June 30, 2023

Yale New Haven Health, Connecticut's largest provider of inpatient acute and outpatient psychiatric care to children, adolescents, adults and seniors, provides high quality care to our most vulnerable patients through care provided in the Emergency Departments, and both inpatient and outpatients settings at Bridgeport, Greenwich, Lawrence & Memorial and Yale New Haven Hospitals. We work closely with our colleagues at Beacon Health Options, and the Departments of Children and Families and Social Services to advocate for the correct level of care in the appropriate setting.

Emergency departments at Yale New Haven Health System hospital affiliates (and across the state and country) are filled with children and adults, some in crisis who are brought to us by caregivers for psychiatric evaluations. In many cases, these patients are cleared for discharge, though are unable to return home due to a variety of circumstances. This results in children and adults remaining in our emergency departments until an alternative arrangement is developed and secured, which takes days, and sometimes weeks. Some children who come to our emergency departments require an inpatient admission for acute psychiatric care, and they too, reside in the medical emergency departments until an inpatient bed becomes available. Others may require outpatient behavioral health services and now there are long waiting lists. Or, a child may need services offered by a psychiatric residential treatment facility (PRTF), which is scarce in Connecticut, particularly for children 12 and under.

On Monday, across the Yale New Haven Health System, there were:

- 86 children, adolescents and adults in our emergency departments- 61 were at Yale New Haven. Of these, 15 children were 18 years and younger; 18 were young adults (19-27 yrs.); and 53 patients were 28 years or older.
 - o 32 of the 86 Emergency Department behavioral health patients were waiting for an inpatient psychiatry bed.
- 16 additional adult patients were waiting on medical units at Yale New Haven Hospital, for an inpatient psychiatry bed.
- 110 children were waiting for assessment in our outpatient services, 40 were waiting for in-home services, and 25 waiting for a therapist.

In November, I presented at Speaker Ritter's Children's Behavioral Health Forum. On that day, there were:

- 77 children under 18 yrs. in our health system psychiatric beds.
- 14 children were waiting in our Emergency Department for an inpatient bed.
 - Another 14 children were waiting to be evaluated.

Children and adults are lingering in our emergency, inpatient medical and inpatient acute psychiatric settings waiting for an appropriate placement, and we need your help.

The Governor has proposed \$159 million in behavioral health services, including:

- \$26.4m for the expansion of adult and children's emergency mobile psychiatric services (EMPS). YNHHS joins the CT Hospital Association in urging these resources be directed to peak demand times and locations, rather than programming services 24/7 on a statewide basis.
- YNHHS urges CT Medicaid to provide coverage for psychiatric Collaborative Care Management (CoCM), an evidenced based model to identify and treat people with behavioral health conditions in primary care, pediatric and women's health settings. (20 states provide coverage for CoCM.)
- \$26m to develop new levels of behavioral health care for children, including Crisis Stabilization Units, or short term sub-acute (and unlocked) units. YNHHS urges the State to invest in existing inpatient and outpatient levels of care to address significant waitlists.
 - Last year, children and adolescents at Yale New Haven spent nearly 900 additional days living on inpatient psychiatric units, after being cleared for discharge, because the appropriate level of care was not available.
- YNHHS supports the Governor's proposed investments in post hospital services, including \$2.4m to DMHAS for mental health peer support in our busiest emergency departments.

To help manage the demand for mental health services, YNHHS urges you to direct additional resources, including Medicaid rate increases for community and hospital outpatient behavioral health services, such as partial hospital programs, school based health centers, intensive outpatient, and other behavioral health services to better serve children and families in the community. Currently, some of our families wait up to 8 weeks for such services.

Thank you for your consideration of our testimony, and all that you do to help us provide care to children, adolescents, adults, and their families.